



PTO/SB/17 (10-07)  
Approved for use through 06/30/2010. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <b>FEE TRANSMITTAL</b> <b>For FY 2008</b>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/033,532
<b>TOTAL AMOUNT OF PAYMENT</b>		Filing Date	October 16, 2001
<b>(\$)</b> 2,160.00		First Named Inventor	Wing P. Leung
		Examiner Name	A. Q. Shang
		Art Unit	2623
		Attorney Docket No.	GS/080 CONT.

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 06-1075 Deposit Account Name: Ropes & Gray LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

**Total Claims** 36 - 31 = 5 **Extra Claims** 5 **Fee (\$)** 50 **Fee Paid (\$)** 300.00

HP = highest number of total claims paid for, if greater than 20.

**Indep. Claims** 8 - 9 = 0 **Extra Claims** 0 **Fee (\$)** 0 **Fee Paid (\$)** 0

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
100	0	0	0	0

**4. OTHER FEE(S)**

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1253 Extension for response within third month	1,050.00
1801 Request for continued examination (RCE) (see 37 ...)	810.00

<b>SUBMITTED BY</b>			
Signature	Regina Sam	Registration No. (Attorney/Agent)	L0381
Name (Print/Type)	Regina Sam	Telephone	(617) 951-7814
		Date	May 28, 2008

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: 5-28-08 Signature: Mary Murphy (Mary Murphy)

**AMENDMENT TRANSMITTAL LETTER**Docket No.  
GS/080 CONT.Application No.  
10/033,532Filing Date  
October 16, 2001Examiner  
A. Q. ShangArt Unit  
2623

Applicant(s): Leung et al.

Invention: APPARATUS AND METHOD FOR PARENTAL CONTROL USING V-CHIP PLUS+ AND  
MASTER PASSWORD**TO THE COMMISSIONER FOR PATENTS**

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	36	- 31 =	6	x 50.00	300.00
Independent Claims	8	- 9 =	0	x 210.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within third month					\$1050.00
Request for continued examination (RCE)					810.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					2,160.00

☒ Large Entity☐ Small Entity☐ No additional fee is required for this amendment.☒ Please charge Deposit Account No. 06-1075 in the amount of \$ \$2,160.00.  
A duplicate copy of this sheet is enclosed.☐ A check in the amount of \$ \_\_\_\_\_ to cover the filing fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge and credit Deposit Account No. 06-1075  
as described below. A duplicate copy of this sheet is enclosed.☒ Credit any overpayment.☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.*Regina Sam*Dated: May 28, 2008

Regina Sam

Attorney/Agent Reg. No.: L0381

ROPES & GRAY LLP  
One International Place  
Boston, Massachusetts 02110  
(617) 951-7000

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Dated: 5-28-08Signature: *Mary Murphy*

(Mary Murphy)



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<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/033,532
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(\$)		First Named Inventor	Wing P. Leung
<b>2,160.00</b>		Examiner Name	A. Q. Shang
		Art Unit	2623
		Attorney Docket No.	GS/080 CONT.

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 06-1075
Deposit Account Name: Ropes & Gray LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
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<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<b>Small Entity</b>		<b>Small Entity</b>		<b>Small Entity</b>	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
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<b>Indep. Claims</b>							
<b>Extra Claims</b>							
<b>Fee (\$)</b>							
<b>Fee Paid (\$)</b>							
8 - 9 = 0 x 0 = 0							
HP = highest number of independent claims paid for, if greater than 3.							
<b>3. APPLICATION SIZE FEE</b>							
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<b>Total Sheets</b>		<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	
- 100 =		/50 =	(round up to a whole number) x				
<b>4. OTHER FEE(S)</b>							
							<b>Fees Paid (\$)</b>
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1253 Extension for response within third month							1,050.00
1801 Request for continued examination (RCE) (see 37 ...)							810.00

<b>SUBMITTED BY</b>			
Signature	Regina Sam	Registration No. (Attorney/Agent)	L0381
Name (Print/Type)	Regina Sam	Telephone	(617) 951-7814
		Date	May 28, 2008

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: 5-28-08

Signature: Mary Murphy (Mary Murphy)



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AMENDMENT TRANSMITTAL LETTER				Docket No. GS/080 CONT.	
Application No. 10/033,532	Filing Date October 16, 2001	Examiner A. Q. Shang	Art Unit 2623		
Applicant(s): Leung et al.					
Invention: APPARATUS AND METHOD FOR PARENTAL CONTROL USING V-CHIP PLUS+ AND MASTER PASSWORD					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
<b>Total Claims</b>	36	- 31 =	6	x 50.00	300.00
<b>Independent Claims</b>	8	- 9 =	0	x 210.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within third month Request for continued examination (RCE)					\$1050.00
					810.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					<b>2,160.00</b>
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>06-1075</u> in the amount of \$ <u>\$2,160.00</u> . A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
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<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
<u>Regina Sam</u> Regina Sam Attorney/Agent Reg. No.: L0381  ROPES & GRAY LLP One International Place Boston, Massachusetts 02110 (617) 951-7000				Dated: <u>May 28, 2008</u>	
<small>I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</small> Dated: <u>5-28-08</u> Signature: <u>Mary Murphy</u> (Mary Murphy)					